

Date: \_\_\_\_\_

Dear \_\_\_\_\_:

Hello. I am writing to you because you have been identified as a student who earned three or more credits in a career and technical education program area in high school. We hope that you are doing well, and we are interested in your current pursuits. Please update us by completing and returning the Career and Technical Education Concentrator (CTE) Follow-up Survey **on or before April 1, 2011**. The information that you provide will be used, along with information provided by your classmates, in a report to Congress to encourage continued funding for CTE programs such as the one you were enrolled in while in high school.

Thanks so much for your cooperation!

Sincerely,

## CAREER and TECHNICAL EDUCATION CONCENTRATOR FOLLOW-UP SURVEY

(Complete and return this survey by 4/1/2011)

Have you graduated from high school? \_\_\_\_\_ Yes \_\_\_\_\_ No

Please indicate your **current** status by checking **all** items that apply:

\_\_\_\_\_ Post-secondary Education

Enrolled in community college, Tennessee Technology Center, four-year college/university, apprenticeship, private cosmetology school, or private technical school.

**If you enrolled in any of the above institutions, continue the following items:**

Institution: \_\_\_\_\_

Your major or courses focus: \_\_\_\_\_

List remedial courses taken (if any) or NA if not applicable: \_\_\_\_\_

List all the dual credits used (if any) or NA if not applicable: \_\_\_\_\_

List all the articulated course (Tech Prep) credits awarded (if any) or NA if not applicable: \_\_\_\_\_

List all post-secondary certifications or licenses awarded (if any) or NA if not applicable: \_\_\_\_\_

\_\_\_\_\_ Military

Branch: \_\_\_\_\_

\_\_\_\_\_ Employed

Employer: \_\_\_\_\_

Job title: \_\_\_\_\_

\_\_\_\_\_ None of the Above

Is what you are currently doing related to your area of career and technical concentration in high school?

My high school area(s) of concentration (list all): \_\_\_\_\_

\_\_\_\_\_ Yes, it's related to my concentration of \_\_\_\_\_

\_\_\_\_\_ No, my current area of concentration is \_\_\_\_\_

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Optional: Phone: ( ) \_\_\_\_\_ E-Mail: \_\_\_\_\_